

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 87240  
District II  
811 South First, Artesia, NM 87210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised March 25, 1999

OIL CONSERVATION DIVISION  
2040 South Pacheco  
Santa Fe, NM 87505

WELL API NO. <b>30-045-30089</b>
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. <b>NMM 073918</b>
7. Lease Name or Unit Agreement Name: <b>Chrisman Gas Com</b>
8. Well No. <b>2</b>
9. Pool name or Wildcat <b>Fruitland Coal</b>

SUNDRY NOTICES AND REPORTS ON WELLS  
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other
2. Name of Operator <b>XTO ENERGY INC.</b>
3. Address of Operator <b>2700 Farmington Ave., Bldg. K. Ste 1 Farmington, NM 87401</b>
4. Well Location Unit Letter <b>L</b> : <b>2,095</b> feet from the <b>South</b> line and <b>1,155</b> feet from the <b>West</b> line Section <b>11</b> Township <b>30N</b> Range <b>12W</b> NMPM County <b>San Juan</b>
10. Elevation (Show whether DR, RKB, RT, GR, etc.) <b>5,915' GL, 5,927' KB</b>

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐

OTHER:

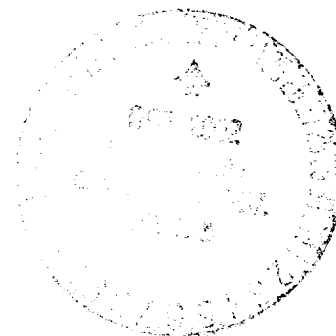
SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐  
CASING TEST AND CEMENT JOB ☐

OTHER: **Surface Commingle** ☒

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

**This well has been surface commingled per the NMCD Order PC-1042.**



I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE **Darrin Steed** TITLE **REGULATORY SUPERVISOR** DATE **10/22/02**

Type or print name **DARRIN STEED**

Telephone No. **505-324-1090**

(This space for State use)

APPROVED BY **[Signature]** TITLE **[Signature]** DATE **OCT 22 2002**  
Conditions of approval, if any: